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PTO/SB/01 (05-03)

Approved for use through 04/30/2003. OMB 0651-0032

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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**Declaration
Submitted
With Initial
Filing

OR

Declaration
Submitted after Initial
Filing (surcharge
(37 CFR 1.16 (e))
required)**Attorney Docket Number**

02-028

First Named Inventor

DENNIS P. CURRAN

COMPLETE IF KNOWN**Application Number**

10/655,916

Filing Date

September 05, 2003

Art Unit

1614

Examiner Name

TO BE ASSIGNED

I hereby declare that:

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**ANALOGS OF DISCODERMOLIDE AND DICTYOSTATIN-1, INTERMEDIATES THEREFOR
AND METHODS OF SYNTHESIS THEREOF***(Title of the Invention)*

the specification of which



is attached hereto

OR



was filed on (MM/DD/YYYY)

09/05/2003

as United States Application Number or PCT International

Application Number

10/655,916

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				Yes	No
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

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DECLARATION — Utility or Design Patent Application

Direct all correspondence to: ☐ Customer Number OR ☒ Correspondence address below

Name

HENRY E. BARTONY, JR.

Address

BARTONY & HARE, LLP
LAW & FINANCE BUILDING, SUITE 1801, 429 FOURTH AVENUE

City

PITTSBURGH

State

PA

ZIP

15219

Country

UNITED STATES

Telephone

412/338-8632

Fax

412/338-8611

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:



A petition has been filed for this unsigned inventor

Given Name

(first and middle (if any))

DENNIS P.

Family Name

or Surname

CURRAN

Inventor's
Signature

Date

5/24/04

Residence: City

PITTSBURGH

State

PA

Country

US

Citizenship

US

Mailing Address

105 S. LINDEN AVENUE

City

PITTSBURGH

State

PA

ZIP

15208

Country

US

NAME OF SECOND INVENTOR:



A petition has been filed for this unsigned inventor

Given Name

(first and middle (if any))

Family Name

or Surname

Inventor's
Signature

Date

Residence: City

State

Country

Citizenship

Mailing Address

City

State

ZIP

Country



Additional inventors or a legal representative are being named on the 6

supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.

DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet

Page 1 of 6

Name of Additional Joint Inventor, If any:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle (if any))

Family Name or Surname

YOUSEUNG

SHIN

Inventor's
Signature

youseung

Date 5/24/04

Residence: City PITTSBURGH

State PA

Country US

Citizenship KOREA

Mailing Address 5030 CENTRE AVENUE, No. 864

Mailing Address

PITTSBURGH

City

State PA

Zip 15213

Country US

Name of Additional Joint Inventor, If any:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle (if any))

Family Name or Surname

Inventor's
Signature

Residence: City

State

Country

Citizenship

Mailing Address

Mailing Address

City

State

Zip

Country

Name of Additional Joint Inventor, If any:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle (if any))

Family Name or Surname

Inventor's
Signature

Date

Residence: City

State

Country

Citizenship

Mailing Address

Mailing Address

City

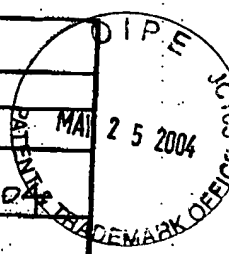
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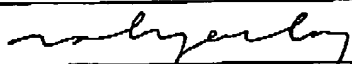
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DECLARATION**ADDITIONAL INVENTOR(S)**
Supplemental SheetPage 2 of 6

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
NAKYEN		CHOY	
Inventor's Signature 		Date 5/24/04	
Residence: City BELLE MEAD	State NJ	Country US	Citizenship KOREA
Mailing Address 823 PRIMROSE COURT			
Mailing Address			
City BELLE MEAD	State NJ	Zip 08502	Country US
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature			
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	Zip	Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	Zip	Country

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DECLARATION**ADDITIONAL INVENTOR(S)**
Supplemental SheetPage 3 of 8

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
BILLY W.		DAY	
Inventor's Signature <i>Billy W. Day</i>		Date <u>5/24/04</u>	
Residence: City	PITTSBURGH	State	PA Country US Citizenship US
Mailing Address 1129 SUNRISE DRIVE			
Mailing Address			
City	PITTSBURGH	State	PA Zip 15243 Country US
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature			
Residence: City		State	Country Citizenship
Mailing Address			
Mailing Address			
City		State	Zip Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City		State	Country Citizenship
Mailing Address			
Mailing Address			
City		State	Zip Country

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DECLARATION**ADDITIONAL INVENTOR(S)**
Supplemental SheetPage 4 of 5

Name of Additional Joint Inventor, If any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
RAGHAVAN		BALACHANDRAN	
Inventor's Signature <i>P. Raghavan</i>		Date <i>5.24-04</i>	
Residence: City WEXFORD	State PA	Country US	Citizenship INDIA
Mailing Address 2548B PHEASANT RUN			
Mailing Address			
City WEXFORD	State PA	Zip 15090	Country US
Name of Additional Joint Inventor, If any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	Zip	Country
Name of Additional Joint Inventor, If any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	Zip	Country

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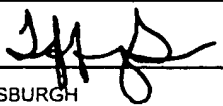
DECLARATION**ADDITIONAL INVENTOR(S)**
Supplemental SheetPage 5 of 6

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
CHARITHA		MADIRAJU	
Inventor's Signature <i>Charitha Madiraju</i>		Date <i>May 24, 04</i>	
Residence: City	PITTSBURGH	State	PA
		Country	US
Citizenship INDIA			
Mailing Address 120 RUSKIN AVENUE, APARTMENT NO. 617			
Mailing Address			
City	PITTSBURGH	State	PA
		Zip	15213
		Country	US
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature			
Residence: City		State	
		Country	
Citizenship			
Mailing Address			
Mailing Address			
City		State	
		Zip	
		Country	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City		State	
		Country	
Citizenship			
Mailing Address			
Mailing Address			
City		State	
		Zip	
		Country	

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DECLARATION**ADDITIONAL INVENTOR(S)**
Supplemental SheetPage 6 of 6

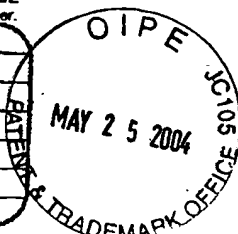
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
TIFFANY		TURNER	
Inventor's Signature 		Date <u>5/25/64</u>	
Residence: City	PITTSBURGH	State	PA
Country	US	Citizenship	US
Mailing Address 225 MELWOOD AVENUE, No. 31			
Mailing Address			
City	PITTSBURGH	State	PA
Zip	15213	Country	US
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature			
Residence: City		State	
Country		Citizenship	
Mailing Address			
Mailing Address			
City		State	
Zip		Country	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City		State	
Country		Citizenship	
Mailing Address			
Mailing Address			
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POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	10/655,918
Filing Date	September 5, 2003
First Named Inventor	DENNIS P. CURRAN
Title	ANALOGS OF DISCODERMOLIDE AND ...
Art Unit	1614
Examiner Name	TO BE ASSIGNED
Attorney Docket Number	02-026



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Number Bar Code
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OR

☒ Practitioner(s) named below:

Name	Registration Number
HENRY E. BARTONY, JR.	34,772

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☐ The above-mentioned Customer Number.

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Address

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State

Zip

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Telephone

Fax

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/98)

SIGNATURE of Applicant or Assignee of Record

Name	DENNIS P. CURRAN		
Signature			
Date	5/14/04	Telephone	412.624.8240

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

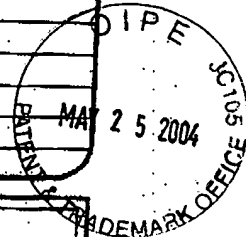
☒ *Total of 7 forms are submitted.

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**POWER OF ATTORNEY OR
AUTHORIZATION OF AGENT**

Application Number	10/655,918
Filing Date	September 5, 2003
First Named Inventor	DENNIS P. CURRAN
Title	ANALOGS OF DISCODERMOLIDE AND ...
Art Unit	1614
Examiner Name	TO BE ASSIGNED
Attorney Docket Number	02-028



I hereby appoint:

☐ Practitioners at Customer Number

OR

☒ Practitioner(s) named below.

Name	Registration Number
HENRY E. BARTONY, JR.	34,772

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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OR

☐ Firm or Individual Name

Address

Address

City

State

Zip

Country

Telephone

Fax

I am the:

☒ Applicant/Inventor.☐ Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Name	YOUSEUNG SHIN
Signature	<i>[Signature]</i>
Date	5/24/04
Telephone	412-621-6632

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of 7 forms are submitted.

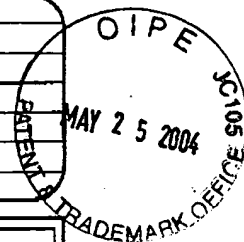
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AUTHORIZATION OF AGENT**

Application Number	10/655,916
Filing Date	September 5, 2003
First Named Inventor	DENNIS P. CURRAN
Title	ANALOGS OF DISCODERMOLIDE AND ...
Art Unit	1614
Examiner Name	TO BE ASSIGNED
Attorney Docket Number	02-028



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Place Customer
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Practitioner(s) named below:

Name	Registration Number
HENRY E. BARTONY, JR.	34,772

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:



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Individual Name

Address

Address

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State

Zip

Country

Telephone

Fax

I am the:



Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/08).**SIGNATURE of Applicant or Assignee of Record**

Name

NARYEN CHOY

Signature

Date

5/24/04

Telephone

908-674-6300

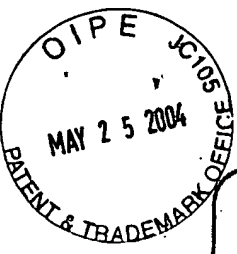
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**POWER OF ATTORNEY OR
AUTHORIZATION OF AGENT**

Application Number	10/855,916
Filing Date	September 5, 2003
First Named Inventor	DENNIS P. CURRAN
Title	ANALOGS OF DISCOERMOLIDE AND ...
Art Unit	1814
Examiner Name	TO BE ASSIGNED
Attorney Docket Number	02-028

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- OR
- ☒ Practitioner(s) named below:

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Name	Registration Number
HENRY E. BARTONY, JR.	34,772

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- ☒ Applicant/Inventor.
- ☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/88).

SIGNATURE of Applicant or Assignee of Record

Name	BILLY W. DAY		
Signature	<i>Billy W. Day</i>		
Date	5-24-04	Telephone	412.648.9706

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POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	10/656,918
Filing Date	September 5, 2003
First Named Inventor	DENNIS P. CURRAN
Title	ANALOGS OF DISCODERMOLIDE AND ...
Art Unit	1614
Examiner Name	TO BE ASSIGNED
Attorney Docket Number	02-028

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☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/08).

SIGNATURE of Applicant or Assignee of Record

Name	RAGHAVAN BALACHANDRAN		
Signature	<i>Raghu Balachandran</i>		
Date	8-25-2004	Telephone	(412) 624-6882

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Application Number	10/655,916
Filing Date	September 5, 2003
First Named Inventor	DENNIS P. CURRAN
Title	ANALOGS OF DISCODERMOLIDE AND ...
Art Unit	1614
Examiner Name	TO BE ASSIGNED
Attorney Docket Number	02-028

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☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/06).

SIGNATURE of Applicant or Assignee of Record

Name

CHARITHA MADIRAJU

Signature

Date

Telephone

412.683.3941

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Application Number	10/655,916
Filing Date	September 5, 2003
First Named Inventor	DENNIS P. CURRAN
Title	ANALOGS OF DISCODERMOLIDE AND ...
Art Unit	1614
Examiner Name	TO BE ASSIGNED
Attorney Docket Number	02-028

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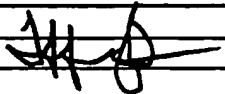
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I am the:

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☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name	TIFFANY TURNER		
Signature			
Date	5/25/04	Telephone	412.605.0295

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